STATE OF ARIZONA
APPLICATION FOR CERTIFICATION
AS A PARTICIPATING CANDIDATE
Pursuant to Arizona Revised Statutes §§16-947 and 948 and AAC R2-20-104 (D)

☑ Initial Application   ☐ Amended Application

FILER ID 200493103

NAME OF CANDIDATE	OFFICE SOUGHT (include Legislative District, if applicable)		
John Huppenthal	STATE SENATE 020		

ADDRESS (NUMBER & STREET)	CITY	STATE	ZIP
8 Bullmoose Circle	Chandler	Az	85224

MAILING ADDRESS (if different from above)	CITY	STATE	ZIP
ck 480-913-0844 480-963-0844	Chandler	Az	85224

CANDIDATE'S TELEPHONE #	CANDIDATE'S FAX #	CANDIDATE'S E-MAIL ADDRESS
480-963-0844	480-963-0844	jhuppent@hotmail.com

CANDIDATE'S PARTY AFFILIATION (if any)
Republican

NAME OF CANDIDATE'S COMMITTEE
Huppenthal 2004

COMMITTEE'S ADDRESS	CITY	STATE	ZIP
8 Bullmoose Circle	Chandler	Az	85224

COMMITTEE'S PHONE #	COMMITTEE'S FAX #	COMMITTEE'S E-MAIL ADDRESS
480-963-0844	480-963-0844	jhuppent@hotmail.com

NAME OF DESIGNATED INDIVIDUAL WITH AUTHORITY TO WITHDRAW FUNDS (IF APPLICABLE) (A.R.S. §16-948)
John Huppenthal

DESIGNATED INDIVIDUAL'S ADDRESS	CITY	STATE	ZIP
8 Bullmoose Cir	Chandler	Az	85224

DESIGNATED INDIVIDUAL'S TELEPHONE #	DESIGNATED INDIVIDUAL'S FAX #	DESIGNATED INDIVIDUAL'S E-MAIL ADDRESS
480-963-0844	480-863-0844	jhuppent@hotmail.com

LIST THE NAME OF THE FINANCIAL INSTITUTION FROM WHICH THE CANDIDATE AND THE DESIGNATED INDIVIDUAL WILL CONDUCT ALL FINANCIAL ACTIVITY FOR THE CANDIDATE'S CAMPAIGN COMMITTEE (do not list account number). (A.R.S. §16-948(A)).

Bank One

DESIGNATED CANDIDATE'S STATEMENT (if applicable) (A.R.S. §16-948(B)): I hereby designate __John Huppenthal__ as my duly authorized Designated Individual, with the authority to withdraw funds and make expenditures from my campaign account on my behalf.

Date: 3/11/04

Candidate's signature